

PRINT NAME

CITY OF CARLSBAD PUBLIC WORKS CONTRACT ADMINISTRATION 1635 FARADAY AVENUE, CARLSBAD CA 92008-7314 PH: 760-602-4677

DATE:	
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INFORMATION FOR CREDIT CARD & CHECK PURCHASES FOR PUBLIC WORKS PROJECTS

To purchase Public Works Plans and Specs with your *credit card* please fax it to: **GRAHAM JORDAN**, **SHIPPING & RECEIVING**, **760-602-0621**. Please fill out completely. Type or print with black ink. To make a purchase with a *check/money* order, mail this form with the payment to the above address.

PROJECT NO:				
PROJECT NAME:				
# OF SET(S):	CONTACT PERSON:			
<u> </u>	COMPANY NAME:			
	PHONE / FAX #			
E-mail Address:		Contract Licer	nse #:	
GENERAL CONT	RACTOR TSUD	PLIER/SUBCONTRACTOR	PLANROOM (FREE)	
GENERAL CONTRACTOR SUPPLIER/SUBCONTRACTOR PLANROOM (FREE)				
STREET ADDRESS: (physical address needed for UPS, GSO or FedEx deliveries)				
CITY: STATE: ZIP CODE:				
MAILING ADDRESS: (If different than physical address.)				
** If Priority Mail, additional mailing fee amount to add is: \$				
ACCOUNT NUMBER FOR ONE OF THE FOLLOWING: (no mailing fee charge added)				
o UPS ACCT. #:				
 GOLDEN STATE OVERNIGHT (Please fax your filled-out form to the fax number above.) 				
o FEDEX ACC	T. #:			
□ PRIORITY OVERNIGHT □ FIRST OVERNIGHT □ STANDARD OVERNIGHT □ OTHER				
☐ MASTERCARD ☐ VISA (We <u>DO NOT</u> accept American Express)				
TOTAL AMOUNT TO BE CHARGED: \$				
Amount for Plans/Spo	ecs: \$	Amount for Postage: \$	\$	
CREDIT CARD #:		EXPII	RATION DATE	

SIGNATURE and TITLE